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Modified states of consciousness are Synchrotherapy's primary tools for helping patients regain balance and wholeness. To consistently achieve these states, professional member Dominique De Backer relies on Hemi-Sync.

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SYNCHROTHERAPY® AND HEMI-SYNC



by Dominique A. De Backer, PhD

Dominique De Backer was born and educated in Belgium and received her degree in psychology from the Free University of Brussels. She is a psychotherapist in private practice in Anthy-sur-Leman, France. Dr. De Backer is well-versed in Jungian analysis, transactional analysis, neurolinguistic programming (NLP), and psychoneuroimmunology. Ten years of personal research culminated in the creation of her original therapeutic modality, Synchrotherapy. The modified states of consciousness accessible with Hemi-Sync are an integral part of this method. Mme De Backer turned from a career in public relations and advertising to psychology upon realizing "If the symbol can sell, the symbol can heal."

There is no reason for thinking that the world—that reality—is limited to what we habitually perceive in our normal waking state. There are even abundant reasons for thinking that many things found in our environment escape us. Every single culture on earth, apart from ours in the West, contends that our plane of existence is not the only one and that others coexist with ours and are somehow dovetailed with it. They also say that these other planes of existence are accessible and can be experienced, providing we change our state of consciousness.

What appears to be happening is that our normal everyday waking state can only process a certain range of perception—that is, a part of what surrounds us and no more—while other non-ordinary states of consciousness would allow us to switch to another range of perception and to perceive other levels of reality. It's as if one were to turn the TV dial from one channel to another. The program received then is different and neither more nor less

real than the one on the previous channel. Non-ordinary states of consciousness would thus appear to be an access to these other planes that are invisible to us in our normal state of consciousness.

In this particular instance, it is not a question of pathological states—dementia, drunkenness, or delirium. The non-ordinary states of consciousness of which I speak are constructive states and capacity builders, regenerative and balancing. There, one is able to feel emotion but not suffering. In this instance, emotions are positive; they provide structure and freedom.

It is necessary for the new psychotherapist to be a link between the neurosciences and the return to sacred healing values which encompass body and mind. It is exciting to note how, in some of our newer therapeutic modalities, people are rediscovering something magical. By magic, I mean a change in how we view the world, understand it, analyze it, interpret it, and select parts of it. It has to do with changing the impact the world has on us and also the impact we have on the world. It's a matter of changing our outlook on life, on other people, on the environment, and it also means changing our interactions with others and their personalities. Carl Gustav Jung has said that a good psychotherapist must be a bit of a shaman; he must be capable of empathy; he must be able to accompany his patient by surrendering his own rigidities, beliefs, and behavior. He must be in a position to retrieve the mind of the patient from the negative domain where it is trapped, to permit him to reintegrate well-being, balance, and life force. He must be able to point out other alternatives, to change the patient's outlook on life, the world, and the environment.

Therapies that employ waking dreams are very close in spirit to the shamanic journey. The techniques implemented by Synchrotherapy (transactional analysis, neurolinguistic programming, etc.) empower us to reprogram our vision of the world, all through engaging with a number of therapeutic modified states of consciousness. Today, modern psychoneuroimmunology is rediscovering the power of these dimensions of being—belief, conviction, visualization, and the power of the mind over the body—to really heal one's self.

Synchrotherapy uses brain waves that are generated during deep and/or REM sleep. It is at this moment when the scenes from the dream become easily accessible and reflect through their symbols, in an extremely precise manner, an x-ray of the unconscious. A patient's entire problematic can be found in these images that can be easily decoded by a practitioner. It is important to note that a Synchrotherapy practitioner never suggests imagery for a patient, but closely follows the imagery produced spontaneously by the patient. To deprogram or reprogram a new behavior pattern, one needs to work on the images, not with the aim of revealing the causes of the symptom but with the aim of mending it. The new behavior pattern has to be experienced with support from the living force of the symbol with all its emotions so

that true change is really implanted at the brain level.

Lucid dreaming is another modified state of consciousness that was scientifically elucidated in 1975 by Keith Hearne at the University of Hull in England. The term itself, lucid dreaming, equates with ancient shamanic techniques and rediscoveries of new therapies and must not be confused with waking dreams. Hearne worked out a series of signals with his experimenters which were to be triggered in a given order each time the dreamer became aware in his dreams. Kearne set up EEG and EOG (electro-oculogram) recordings for a control. Well, the agreed-upon signals given by his dreamer coincided almost exactly with the EEG and EOG recordings in terms of significant sequences, which would show an information transfer from a dream state to the consciousness of the subject.

The Hemi-Sync technique is one of the few Western approaches to this special state which is the lucid dream, as it permits one to "dream while awake," remaining very lucid, since the left hemisphere is perfectly operational. Remember here that the left side of the brain controls language, analysis, things numerical, logic. Synchrotherapy uses this technique as well as the repair of these images with the help of the major archetypes. The human psyche, regardless of culture, is replete with archetypes and symbols that are universal structures.

For psychotherapy to be effective, it is necessary for it to work directly with the data banks of the unconscious and with the unconscious itself. A true change in the psyche, lasting and resistant to the greatest stress, can only be realized in that space. In the domain of conscious dreaming, the dreamer takes control of what's happening. He is no longer dependent on his automatic inhibitions, his fears and agonies. It is he who imposes his choices and integrates them. It is he who labors and achieves through a mind which acts and learns. Highly trained lucid dreamers achieve this state anywhere from one to four times a month, after an apprenticeship which can take months, if not years. With the Hemi-Sync process, plugging in is all it takes. It's instantaneous.

During the course of these dreams, people can experience visions, a discrete state of consciousness. A vision is the perception of another plane of existence, another order of reality. It has a cultural, symbolic meaning; it has structure and conveys a message. It should not be confused with hallucination, which is a disturbance of the senses and brain mechanisms that generates fictitious perceptions. Hallucination has neither structure nor internal logic nor cultural significance—symbolic or religious. It is generated during an ordinary state of consciousness.

The only obstacle to achieving these different types of modified states of consciousness is fear. But only go beyond the fear of this strangeness one time, accept one time the loss of habitual landmarks, and access to modified states of consciousness becomes not only a natural thing but also a way to energize oneself easily and

consciously. The Synchrotherapy practitioner attends to the patient with tact, mildness, and firmness in order to help her go beyond the barrier of her emotions and her fear.

Visualization is one of the basic tools for modified states of consciousness and for the therapies which employ them. Synchrotherapy uses Hemi-Sync-based visualization; the brain waves most often used are theta and slow delta, those of sleep. We attain a state of "mind awake/body asleep."

Contrary to other therapies, Synchrotherapy utilizes images that issue naturally from the unconscious rather than those induced by the practitioner. The Synchrotherapist follows the patient in production of images and not the reverse. Positive mental images are creators and negative mental images are destroyers. One of the great keys to Synchrotherapy is to let the unconscious produce positive images that have been repaired by application of techniques such as transactional analysis, NLP, and Jungian analysis (with the intervention of the archetypes).

In the creation of mental imagery, it is not a question of effort. Conscious effort to remove a negative mental image results in reinforcing it. It is not enough to no longer think of a negative image, because it is repressed into the unconscious and continues to live there and act there; it maintains our negative scripts. But it is necessary to constantly create positive images, to entertain them, to visualize positively. This method permits substitution of positive images for undesirable negative images. That is what constitutes classical visualization.

Synchrotherapy operates differently: we do not create positive imagery, we call upon the resources of the unconscious in order to transform the image to be reworked. We seek out its resources or else we create them. If required, we give ourselves permission. We change our beliefs. We negotiate with archetypes by means of therapeutic techniques.

In traditional visualization, it is the conscious "I" which creates the image. It is an intentional action by which we aim at doing something ourselves, by ourselves, for ourselves. In Synchrotherapy, the image to be processed emerges from the unconscious itself and is acted upon while we are producing theta and slow delta waves that are, typically, sleep and REM sleep brain waves. Working with the image brings us to the Symbol.

It may well be that modified states of consciousness will turn out to be the future of psychotherapy. Psychological problems are tied to the limited framework in which one has recorded the view of oneself, one's life and one's relationships with others. For instance, one person is depressive because she feels inadequate and inferior, someone else because she feels her family and close friends are offensive, another because she lives in regrets about her past. One feels oneself in a blind alley from which there is no escape. All of the blockages, brakes, inhibitions, psychological barriers, inappropriate and totally inadequate reactions, the fears

and the agonies, are always connected with rigid beliefs, with a compartmentalized interpretation of what we see. This interpretation and these beliefs do not correspond to any profound reality; even if it is based on logic, it has been built on foundations, on premises, that take only one part of objective reality into account. And that has been remodeled through filters. In all the clinical cases that we therapists treat, we see that the framework which holds our view of ourselves and others is the cause of psychological disturbance or of the perception of self as evil.

Psychological difficulties can be eliminated, indeed managed, by a reframing of the point of view—how one sees oneself and one's life. Modified states of consciousness have a large part to play; they broaden one's view and understanding of oneself.

The truly significant difference between Synchrotherapy and other approaches is the element of transfer. A Synchrotherapy practitioner's patient does not transfer onto the therapist but onto a part of himself that is perceived as his guide, his spiritual protector. In this notion of transpersonal transfer, there is nothing religious, no psychic or esoteric manipulation. There is only an awareness, on the mental and emotional plane, of a part of our unconscious that connects us to a dimension greater than our Ego.

This allows the patient to broaden his perspective and his understanding of himself, the world, and others, to leave rigid behaviors and self-inflicted labels behind, and to view his problem from a higher perspective, and then quite frequently to find solutions that arise—all by themselves—from within.

Visualization techniques allow us to create our own images through personal effort. The technique consists of generating a precise mental image of what one wants to happen, then fixing one's attention on that image long enough for it to become objective reality. This technique applies to the global person and stems from the holistic theory that a person is an indivisible whole which cannot be explained by separate consideration of physical, physiological, and psychic components.

Case Study

H. G., a chemical engineer and university professor, came to consult me after having tried a number of therapies. He presented with severe endogenous depression, as well as prostate and bladder cancer. He underwent prostatectomy and refused chemotherapy. His history revealed a difficult childhood in which his parents' divorce played an important part. He was brought up by his mother, a renowned Jungian psychoanalyst.

Biologically, his bladder cancer was connected to a mental conflict termed "territory delineation"—that is, a province of life where the person suffering with this kind of pathology has been unable to set his boundaries and take possession of his territory. Endogenous depression reflects a conflict in which devaluation and guilt play important roles. I essentially employed *Transcendence*

and Surf at the patient's request, since he did not respond well to METAMUSIC.

At the time of his first consultation, H. G. announced that no therapy had been able to put him in touch with his unconscious. Jungian analysis, as well as analytical therapy, had failed. He could not remember his dreams. With Hemi-Sync, he started producing symbols relatively easily. His relationship with his mother was exceedingly conflictual, and her death was internalized as conscious, guilty relief.

After twelve sessions, H. G.'s physical condition is now stabilized. The biological markers have returned to normal and so has the most recent scan. His production of symbolic imagery with Hemi-Sync enabled him to understand that the territory where he had been unable to set boundaries was his unconscious, which he had carefully padlocked in order to avoid intrusion by his professional-psychoanalyst mother. After having reappropriated this territory, everything fell into place quickly and naturally.

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BINAURAL BEATS AFFECT VIGILANCE PERFORMANCE AND MOOD

James D. Lane, Stefan J. Kasian, Justine E. Owens, and Gail R. Marsh

ABSTRACT

When two tones of slightly different frequency are presented separately to the left and right ears the listener perceives a single tone that varies in amplitude at a frequency equal to the frequency difference between the two tones—a perceptual phenomenon known as the binaural auditory beat. Anecdotal reports suggest that binaural auditory beats within the electroencephalograph frequency range can entrain EEG activity and may affect states of consciousness, although few scientific studies have been published. This study compared the effects of binaural auditory beats in the EEG beta and EEG theta/delta frequency ranges on mood and on performance of a vigilance task to investigate their effects on subjective and objective measures of arousal. Participants ($n = 29$) performed a 30-minute visual vigilance task on three different days while listening to pink noise containing simple tones or binaural beats either in the beta range (16 and 24 Hz) or the theta/delta

range (1.5 and 4 Hz). However, participants were kept blind to the presence of binaural beats to control expectation effects. Presentation of beta-frequency binaural beats yielded more correct target detections and fewer false alarms than presentation of theta/delta frequency binaural beats. In addition, beta-frequency beats were associated with less negative mood. Results suggest that presentation of binaural auditory beats can affect psychomotor performance and mood. This technology may have applications for the control of attention and arousal and the enhancement of human performance. ©1998 Elsevier Science, Inc.

KEYWORDS: binaural auditory beats, vigilance performance, mood, frequency following response

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1998 PROFESSIONAL SEMINAR

"Discovering the Inner Healer with Hemi-Sync," The Monroe Institute's sixteenth annual Professional Seminar, will be held from July 25 to July 31. Papers and plans for experiential sessions on this theme are invited. Please contact professional division director Shirley Bliley with your submissions.

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